



JHAY0239

# Private Client SIPP Application Form

**Application guide**

Please complete this form in BLOCK CAPITALS and black ink and return it to James Hay Partnership, Dunn's House, St. Paul's Road, Salisbury, SP2 7BF. If you require any assistance please call your Account Executive or our general enquiry number 0845 850 4455.

If you already have a SIPP with James Hay Partnership, please state the Member number.

**1 Personal details** Applicant to complete

**Important:** Please answer all questions in this section. If you do not fully complete this part of the form, it may delay the application process.

Title

Forename(s)

Surname

Any other name you have been, or are, known by

Date of birth

Permanent residential address   
  
  
 Postcode

Time at current address  Years  Months

If you have lived at your current address for less than 18 months, please provide your previous address

Previous address   
  
  
 Postcode

Daytime phone  Evening phone

Mobile  Fax

Email

National Insurance number  **OR** I have never had a National Insurance number

Nationality

Country of residence

Do you have a dual nationality?  Yes  No  
If Yes, please specify

**1 Personal details (continued)**

Applicant to complete

Occupation

Marital status  Approximate annual earnings from your occupation

Gender  Male  Female Selected retirement date

Are you a US Person or resident of the US for tax purposes?  Yes\*  No

Are you an undischarged bankrupt?  Yes\*  No

\* If Yes, we may not be able to proceed with your application. Please contact us for further details.

**1a Employment details**

Applicant to complete

Employment status:

Employed  Self employed  Unemployed

Caring for one or more children under the age of 16 years  Pensioner

Caring for a person aged 16 years or over  In full time education

Other (please provide details)

Employer name

Employer address

Postcode

Have you decided to opt out of or not join your employer's pension scheme?  Yes  No

**PLEASE NOTE: If you are not employed or if your employer does not offer a pension scheme that you would be eligible to join, please answer No to the above question.**

**1b Source of wealth**

Applicant to complete

Please tick one or more of the following options to indicate from which source(s) your Private Client SIPP is to be funded. Please also include the source of wealth for any contributions made by a third party (excluding an employer):

	Your contribution	Third party contribution
Transfers from existing products	<input type="checkbox"/>	
Income from employment	<input type="checkbox"/>	<input type="checkbox"/>
Income from savings/investments	<input type="checkbox"/>	<input type="checkbox"/>
Gift	<input type="checkbox"/>	<input type="checkbox"/>
Lottery and other winnings	<input type="checkbox"/>	<input type="checkbox"/>
Property sale	<input type="checkbox"/>	<input type="checkbox"/>
Inheritance	<input type="checkbox"/>	<input type="checkbox"/>
Divorce settlement	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify)	<input type="text"/>	
	<input type="text"/>	
	<input type="text"/>	

Please list details of any schemes you wish to transfer here and provide further details in the sections that follow.

Scheme name	Policy number(s)	Estimated value
<b>Total amount</b>		

**PLEASE NOTE:** Whether or not you have already requested the transfer, you will still need to provide us with all the information relating to the transfer. Please ensure you complete the following 'Transferring scheme' sections fully for each transfer you would like to make.

For any transfers that you have not already requested, we will request them on your behalf.

**PLEASE NOTE:** If the transfers are made up of a mixture of plans in capped drawdown and plans in flexi-access drawdown, we will convert all to flexi-access drawdown upon receipt.

**PLEASE NOTE:** The ceding schemes may require additional information before releasing any funds and this could delay your transfer to us.

2a Transferring scheme

Scheme name

Contact name

Scheme address

Postcode

Policy number(s)

Scheme type  Occupational money purchase (defined contribution)  Occupational defined benefits (final salary)\*  
 Other registered pension scheme  Qualifying recognised overseas pension scheme

\* We will require confirmation from your financial adviser that they have advised you in respect of this transfer and recommended that you proceed with the transfer.

HMRC Reference

Estimated value  £

Do you wish to transfer the full value of this scheme?  Yes  No

If no, please state the amount you wish to transfer  £

Status of transfer value  Uncrystallised  Crystallised  Phased Drawdown

Does the payment include Beneficiary Pension Rights?  Yes  No

If 'YES' please complete the deceased's personal details below.

If 'YES' is income from the Beneficiary Pension Rights taxable?  Yes  No

Is James Hay Partnership the administrator of this scheme?  Yes  No

Are the assets to be re-registered into your Private Client SIPP as part of an in-specie transfer?  Yes  No

If "YES" we will require a current valuation from the transferring scheme and a list of assets. We will then confirm which assets can be re-registered.

**2a Transferring scheme (continued)**

Applicant to complete

Is the transfer payment in respect of a Pension Credit (pension rights received as part of a divorce settlement)?

Yes  No

If 'YES' please supply a certified copy of the court order, decree absolute and pension sharing annex.

Is this part of a block transfer?

Yes  No

Have you already instructed this scheme that you wish to transfer?

Yes  No

**DECEASED'S PERSONAL DETAILS (IF APPLICABLE - FOR TRANSFER FROM DECEASED'S SCHEME)**

Full name

Date of birth

Date of death

National Insurance number

**2b Transferring scheme**

Applicant to complete

Scheme name

Contact name

Scheme address

Postcode

Policy number(s)

Scheme type  Occupational money purchase (defined contribution)

Occupational defined benefits (final salary)\*

Other registered pension scheme

Qualifying recognised overseas pension scheme

\* We will require confirmation from your financial adviser that they have advised you in respect of this transfer and recommended that you proceed with the transfer.

HMRC Reference

Estimated value  £

Do you wish to transfer the full value of this scheme?

Yes  No

If no, please state the amount you wish to transfer

£

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If 'YES' please supply a certified copy of the court order, decree absolute and pension sharing annex.

Is this part of a block transfer?

Yes  No

Have you already instructed this scheme that you wish to transfer?

Yes  No

**DECEASED'S PERSONAL DETAILS (IF APPLICABLE - FOR TRANSFER FROM DECEASED'S SCHEME)**

Full name

Date of birth

Date of death

National Insurance number

Scheme name

Contact name

Scheme address   
  
  
 Postcode

Policy number(s)

Scheme type  Occupational money purchase (defined contribution)  Occupational defined benefits (final salary)\*  
 Other registered pension scheme  Qualifying recognised overseas pension scheme

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Is this part of a block transfer?  Yes  No

Have you already instructed this scheme that you wish to transfer?  Yes  No

#### DECEASED'S PERSONAL DETAILS (IF APPLICABLE - FOR TRANSFER FROM DECEASED'S SCHEME)

Full name

Date of birth

Date of death

National Insurance number

Scheme name

Contact name

Scheme address   
  
  
 Postcode

Policy number(s)

Scheme type  Occupational money purchase (defined contribution)  Occupational defined benefits (final salary)\*  
 Other registered pension scheme  Qualifying recognised overseas pension scheme

\* We will require confirmation from your financial adviser that they have advised you in respect of this transfer and recommended that you proceed with the transfer.

HMRC Reference

Estimated value  £

Do you wish to transfer the full value of this scheme?  Yes  No

If no, please state the amount you wish to transfer

£

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Is James Hay Partnership the administrator of this scheme?  Yes  No

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If 'YES' please supply a certified copy of the court order, decree absolute and pension sharing annex.

Is this part of a block transfer?  Yes  No

Have you already instructed this scheme that you wish to transfer?  Yes  No

#### DECEASED'S PERSONAL DETAILS (IF APPLICABLE - FOR TRANSFER FROM DECEASED'S SCHEME)

Full name

Date of birth

Date of death

National Insurance number

### 3 Contributions

Please complete this section if single or regular contributions will be paid into your Private Client SIPP.

**PLEASE NOTE: Making contributions to your Private Client SIPP will invalidate any enhanced protection or fixed protection you currently have. If your contributions in respect of a tax year exceed the annual allowance, then you may be subject to a personal tax charge called the annual allowance charge. It is possible for unused annual allowance to be carried forward for up to three years. You should speak to your Financial Adviser about this.**

#### 3a Entitlement to tax relief

Applicant to complete

- (i) I have relevant UK earnings chargeable to income tax, or general earnings from overseas Crown employment subject to UK tax, in this tax year.  Yes  No
- (ii) I have, or shall have, been resident in the UK at some time during this tax year.  Yes  No
- (iii) My spouse or civil partner has general earnings from overseas Crown employment subject to UK tax, for this tax year.  Yes  No
- (iv) I or my spouse or civil partner is in overseas Crown employment, but for this tax year do not have general earnings from overseas Crown employment subject to UK tax.  Yes  No

If you have ticked Yes to (i) or (ii) we will reclaim basic rate tax on your personal contributions. If you have ticked Yes to (iii) or (iv) we will reclaim basic rate tax on your personal contributions up to £3,600 gross. If you have ticked No to all of the above or have not completed this section at all, we will not reclaim any basic rate tax relief on your personal contributions.

#### 3b Personal contributions

Applicant to complete

How much would you like to pay into your Private Client SIPP?

##### Single contribution

Amount  (gross) by cheque, payable to 'James Hay Pension Trustees Limited'

##### Regular contribution

Amount  (gross) by Direct Debit

**The above amount(s) are the gross amount(s) you wish to contribute. If, as per section 3a, we are able to reclaim basic rate tax on your personal contributions, the amount you actually pay into your Private Client SIPP should be the net amount i.e. the gross amount less basic rate tax.**

Frequency:  Monthly  Quarterly  Half yearly  Annually

Start date

If regular contribution payments are to be made to your Private Client SIPP please forward a completed Direct Debit Mandate to us. Please allow 20 business days for us to set up the Direct Debit.

Where we are able to reclaim basic rate tax on your net personal contribution, the tax reclaim will take between 7 and 11 weeks to be received from HMRC. Please note that the value of the reclaim can only be invested once it has been paid into your SIPP Bank Account and it has cleared.

#### 3c Third party contributions

Applicant to complete

A third party may make a contribution on your behalf to your Private Client SIPP. If a third party (other than your employer) is to make contributions to your Private Client SIPP, please provide their details below. Please also note that we will need to carry out anti-money laundering identification checks on the third party before we can accept any contributions from them.

If your employer is to make contributions to your Private Client SIPP, please complete section 3d.

Third party name

Any other name

the third party  
has been, or is,  
known by

Address

Postcode

Date of birth

**3d Employer contributions**

Applicant to complete

If your employer is to make employer contributions to your Private Client SIPP, please provide their details below. Please note that we will need to carry out anti-money laundering identification checks on your employer before we can accept any contributions from them.

Contact name

Country of establishment/ incorporation

Registered number (If applicable)

Nature of business

Registered address

Telephone  Postcode

Fax

Email

Do you give authority for James Hay Partnership to correspond with your employer directly? Yes  No

All employer contributions are paid gross.

How much will your employer pay into your Private Client SIPP?

**Single contribution**

Amount  £  (gross) by cheque, payable to 'James Hay Pension Trustees Limited'

If your employer wishes to regularly contribute to your Private Client SIPP please ask them to complete and sign the 'Employer's payment record for regular contributions' section below. For regular contributions your employer will also need to complete a Direct Debit Mandate. Where applicable, please enclose any Direct Debit Mandates with this form. Please allow 20 business days for us to set up the Direct Debit.

**3e Employer's payment record for regular contributions**

Employer to complete

You, the employer, should complete this section if you will be making regular payments into your employee's Private Client SIPP, either deducted from the employee's salary, or from your own funds. Regular payments must be submitted via Direct Debit. You, the employer, must prepare and maintain a record of the payments due to be paid to your employee's pension.

Amount  £  (gross) by Direct Debit

Frequency  Monthly  Quarterly  Half yearly  Annually

Start date

Please allow 20 business days for us to set up the Direct Debit.

We will use the first contribution date as the ongoing collection day for the stated contributions. The due date for The Pensions Regulator purposes, in relation to these regular payments, will always be the 19th day of the following month.

**To be signed on behalf of the employer**

I confirm that the information in this section is accurate and I will notify you if any of these details change.

Signed

Name

Position

Date

Contact number (if different from details already given)

I wish to invest in the following investment options (tick appropriate boxes):

**SANTANDER SHAREDEALING (provided by Abbey Stockbrokers Limited)**  
Please complete the Santander Sharedealing Application Form available from [www.jameshay.co.uk](http://www.jameshay.co.uk).

**Cash Panel**  
Please complete the application form for your selected Cash Panel provider and send it to us at the address below. Upon receipt of the completed form, if there is sufficient cash in your SIPP Bank Account, we will forward the instruction to the provider.

**Investment Manager**  
Please complete Section 4a of this Application Form.

**Investment Centre Funds**  
If you have sufficient cash available in your SIPP Bank Account, Investment Centre trades may be placed via the 'Trade' area of James Hay Online. Alternatively, you may submit paper instructions to us using an Investment Centre Buy Form. Please note there is no charge for placing trades online but there is a charge if you submit paper investment instructions.

If you wish to make regular investments, please complete an Investment Centre Regular Buy Form and send it to us at the address below.

**COMMERCIAL PROPERTY**  
Please read the Commercial Property Purchase Guide and complete a SIPP Commercial Property Questionnaire and send it to us at the address below.

**OTHER PERMISSIBLE INVESTMENTS**  
Please enclose the appropriate Fund Manager's Application Form having completed the amount to be invested, the fund choice and remuneration details. As the investment will be made in our name, we will complete the rest of the investment application form.

**PLEASE NOTE: The forms and documents detailed above can be obtained from our website at [www.jameshay.co.uk](http://www.jameshay.co.uk).**

Address to send forms to:

James Hay Partnership, Dunn's House, St Paul's Road, Salisbury SP2 7BF

I would like to appoint an Investment Manager to act on my behalf in respect of my Private Client SIPP.

The following information allows us to identify and begin account opening conversations with your selected Investment Manager. The information is optional at this stage but if you do not provide it now we may need to contact you to obtain it once your Private Client SIPP has been opened. Please be aware this may delay the account opening process with the Investment Manager. Please note that any Investment Manager must be UK based and FCA authorised and agree to our operational requirements.

Firm name

Address

Postcode

Email

FCA firm reference number (if known)

Telephone  Fax

Basis of appointment  Execution only  Advisory  Discretionary  Not yet decided

Please confirm the amount or percentage of your Private Client SIPP plan to be transferred to your Investment Manager.

**5 Request to take benefits**

Applicant to complete

I wish to take immediate income drawdown or an uncrystallised funds pension lump sum from my Private Client SIPP  Yes  No

The expected transfer is already in income drawdown  Yes  No

If you have answered Yes to the first question above, please complete a Benefit Payment Form which is available from our website at [www.jameshay.co.uk](http://www.jameshay.co.uk) and return it to James Hay Partnership, Dunn's House, St Paul's Road, Salisbury, SP2 7BF. We do not require the Benefit Payment Form to establish your Private Client SIPP but we are unable to calculate benefits or commence income payments without it. If you have answered Yes to the second question above, please complete a Drawdown to Drawdown Transfer Form also available from our website, to provide us with your on-going income requirements.

Please also forward your birth certificate or a black and white copy of your passport. In the absence of either of the above, please ask your Financial Adviser to complete an 'Evidence of age' proforma on your Financial Adviser's company headed paper.

**PLEASE NOTE: We cannot commence benefit payments until we have received evidence of your age.**

**6 Flexibly accessing your pension with another provider**

Applicant to complete

You must inform us if you have flexibly accessed your pension with another provider.

Have you taken an income through flexi-access drawdown or taken an Uncrystallised Funds Pension Lump Sum from a pension you hold with another provider (including any plans you are transferring to James Hay Partnership)?  Yes  No

**7 Financial Adviser details and adviser charges (if applicable)**

Applicant to complete

Please only complete this section if you have appointed an FCA regulated Financial Adviser who is going to advise you on your Private Client SIPP. If you have agreed with your Financial Adviser that they are to be paid adviser charges from your Private Client SIPP, please also complete sections 7a to 7d as appropriate.

Company name	<input type="text"/>		
Network name (if applicable)	<input type="text"/>		
Contact name	<input type="text"/>		
FCA firm reference number	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Telephone	<input type="text"/>	Fax	<input type="text"/>
Email	<input type="text"/>		

**PLEASE NOTE: Your Financial Adviser will need to sign up to our Financial Adviser Terms of Business. This is available from our website at [www.jameshay.co.uk](http://www.jameshay.co.uk) or by calling 0845 850 4455.**

**7a Adviser charges: One off charge**

Applicant to complete

If the Financial Adviser intends to charge a one off amount for the establishment of your Private Client SIPP, please indicate the amount that is required below. We will make this payment automatically when sufficient funds are available.

One off charge amount  £

Does your Financial Adviser intend to send us invoices for the adviser charges or would they like us to calculate them?

Invoice only - upon receipt of an invoice we will check to ensure the amount does not exceed the amounts detailed below and/or overleaf

OR

Our calculation - we will calculate and pay the adviser charges based on the information you provide below and/or overleaf.

**PLEASE NOTE: The maximum adviser charge we will facilitate from the Private Client SIPP is 5% (including VAT).**

#### INITIAL ADVISER CHARGES FOR CONTRIBUTIONS

##### Option 1

Percentage  % of each contribution received

OR

##### Option 2

Fixed amount  £ of each contribution received

#### INITIAL ADVISER CHARGES FOR TRANSFERS IN

##### Option 1

Percentage  % of each pension transfer received

OR

##### Option 2

Fixed amount  £ of each pension transfer received

Do you want your adviser charge calculated on the value of contributions before or after any tax reclaims are applied?

Before  After  N/A

#### ONGOING ADVISER CHARGES

##### Option 1

Percentage  % of the value of your Private Client SIPP

OR

##### Option 2

Fixed amount  £

OR

##### Option 3

Tiered percentage

From	£0.00	to	<input type="text"/> £	take	<input type="text"/> %
From	<input type="text"/> £	to	<input type="text"/> £	take	<input type="text"/> %
From	<input type="text"/> £	to	<input type="text"/> £	take	<input type="text"/> %
From	<input type="text"/> £	to	<input type="text"/> £	take	<input type="text"/> %
Over	<input type="text"/> £	take	<input type="text"/> %		

For Options 1 and 3, are any percentage based ongoing adviser charges to be applied across **all** assets in your Private Client SIPP?

Yes  No

If 'No' which category do you wish to **exclude**?

- Cash in the SIPP Bank Account
- Cash held with Cash Panel provider
- Investment Centre Funds
- Assets held with an Investment Manager
- Commercial property
- Other permissible investments

How frequently would you like your ongoing adviser charges paid? Monthly  Quarterly  Half yearly  Annually

**If the fixed amount of product level adviser charges exceeds 5% (including VAT) this may be queried with you.**

#### INITIAL ADVISER CHARGES FOR INVESTMENTS IN THE JAMES HAY INVESTMENT CENTRE

Percentage  %

#### INITIAL ADVISER CHARGES FOR OTHER PERMISSIBLE INVESTMENTS

##### Option 1

Percentage  %

OR

##### Option 2

Fixed amount  £

#### ONGOING ADVISER CHARGES FOR OTHER PERMISSIBLE INVESTMENTS

##### Option 1

Percentage  %

OR

##### Option 2

Fixed amount  £

**If your Financial Adviser wishes to take investment level adviser charges on any investment this should be stated when the trades are placed.**

**If the level of investment level adviser charges stated on a trade instruction exceeds the levels stated above, this may delay the trade as we will query this.**

**PLEASE NOTE: The maximum adviser charge to be facilitated must not exceed 5% (including VAT).**

Please provide details of those people you would like to receive any benefit payable under your Private Client SIPP on your death. This Expression of Wish does not bind the Trustee or Scheme Administrator of the Private Client SIPP, but will help them to pay out benefits in line with your wishes. Your Expression of Wish can be changed in writing at any time.

**8a Individual details**

Applicant to complete

Please provide details of any individuals to whom you would like the proceeds of your Private Client SIPP to be paid, in the event of your death.

Name	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Date of birth	<input type="text"/>	Relationship	<input type="text"/>
% of death benefits	<input type="text"/>		
Name	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Date of birth	<input type="text"/>	Relationship	<input type="text"/>
Relationship	<input type="text"/>		
% of death benefits	<input type="text"/>		
Name	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Date of birth	<input type="text"/>	Relationship	<input type="text"/>
Relationship	<input type="text"/>		
% of death benefits	<input type="text"/>		

**8b Charity details**

Applicant to complete

Please provide details of any charity to which you would like the proceeds of your Private Client SIPP to be paid, in the event of your death.

Charity name	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Registered charity number (If known)	<input type="text"/>		
% of death benefits	<input type="text"/>		

**PLEASE NOTE: Any chosen charity must be a UK registered charity.**

Please provide details of any Trust to which you would like the proceeds of your Private Client SIPP to be paid, in the event of your death.

Name of Trust	<input type="text"/>		
Address where Trust is held	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Date of Trust	<input type="text"/>	<input type="text"/>	<input type="text"/>
Name of Trustee(s)	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
% of death benefits	<input type="text"/>		

**PLEASE NOTE:**

- 1) We require a certified true copy of any Trusts detailed above for our records. Please ensure this is sent to James Hay Partnership, Dunn's House, St Paul's Road, Salisbury, SP2 7BF once you have submitted this Application Form.
- 2) We are not Trust experts and cannot be held responsible for ensuring a Trust fulfils the purposes for which it was intended.

You have the right to cancel this application to set up a Private Client SIPP with us.

We will send you a cancellation notice and you will have 30 days from receipt of this notice to notify us that you have changed your mind and wish to cancel your application.

**For applicants who have appointed a Financial Adviser**

We will proceed with your Private Client SIPP application during your 30 day cancellation period and you can give us investment instructions during this period. However, if you choose to cancel your Private Client SIPP under the terms of the cancellation rights, any investment held by your Private Client SIPP will be sold and we will return any contributions that were made into your Private Client SIPP to their original source. We will also arrange to transfer any money that has been received from previous pensions to another provider chosen by you. The amount to be repaid may be less than the amount paid to us if the value of your investment has fallen at the time it is sold. This will be explained in the cancellation notice that we will send you.

**For applicants who do not have a Financial Adviser**

As you have not received any advice from a Financial Adviser before applying for your Private Client SIPP, you will receive a 30 day period during which you can cancel your application. During this period we will not permit any investments within your Private Client SIPP in case you decide to cancel. However, you have the option to waive your rights to your 30 day cancellation period. If you choose to do this, we will proceed with your application and any money held within your Private Client SIPP will be available for immediate investment upon receipt of your instructions.

If you do not wish to waive your rights, we will send you a cancellation notice and wait for 30 days before continuing with setting up your Private Client SIPP. If you wish to waive your rights, please read the following confirmation and then tick the box to confirm your acceptance:

- I confirm my decision to waive my right to a cancellation period for my Private Client SIPP application. I accept that once I have waived my right to this cancellation period, I will no longer be able to cancel my Private Client SIPP or have any money received into my Private Client SIPP returned (unless it is subject to separate cancellation rights). I also accept that my Private Client SIPP will be fully opened and will be subject to all the applicable charges as detailed in the Private Client SIPP Charges Schedule.

James Hay Insurance Company Limited is the provider of the Private Client SIPP and has appointed James Hay Pension Trustees Limited as Trustee of the Scheme and James Hay Administration Company Limited to administer the Scheme. Reference to James Hay Partnership in this document includes these companies where relevant in the particular context and unless a specific company name is mentioned.

**TRANSFERS**

- 1) We are not an annuity provider and we are unable to accept Open Market Options.
- 2) Rather than your current pension assets having to be sold and a cash value transferred, it may be possible to transfer the physical assets with the agreement of your existing pension provider. This is called an in-specie transfer. For more information on the availability of this facility please call 0845 850 4455.
- 3) Enhanced or fixed protection will not be lost on transfer provided it is a 'permitted transfer' under HMRC rules.
- 4) Any entitlement to take lump sum rights in excess of 25% may be retained provided the transfer is part of a block transfer.

**BENEFITS**

- 1) The maximum Pension Commencement Lump Sum payable when you designate funds for income drawdown will normally be up to the lower of 25% of your Private Client SIPP, or 25% of your Private Client SIPP up to the standard lifetime allowance. The Pension Commencement Lump Sum has to be taken as a lump sum and cannot be taken monthly.
- 2) If taking an Uncrystallised Funds Pension Lump Sum, the tax free element of 25% will be paid separately to the balance which is paid after the deduction of income tax. Both are paid as lump sums and cannot be taken monthly.
- 3) Before any benefits can be paid from your Private Client SIPP, we will require the full transfer value and associated transfer information, including any HMRC certificates enhancing your lifetime allowance, the re-registration of any assets being transferred in-specie to be complete, any contributions and evidence of your age, name and address.
- 4) If taking income drawdown, to ensure that your income payment is included within our monthly income payroll, sufficient cleared money must be held in the SIPP Bank Account at least 9 business days before the end of the month prior to the date the income payment is to be made.
- 5) We will always pay income on the 1st business day of the month.
  - If you wish to start taking an income from your Private Client SIPP, you must notify us at least 15 business days before the end of the month prior to the date the first income payment is to be made.
  - If you wish to vary the amount of income you receive, you must notify us at least 10 business days before the end of the month prior to the date the change is to come into effect.
  - If you are in partial drawdown and wish to take income from your remaining uncrystallised funds, you must notify us at least 15 business days before the end of the month prior to the date the change is to come into effect.

The 'date the change is to come into effect' is always the 1st business day of the month.

**INVESTMENTS**

- 1) We will deposit all money received into your SIPP Bank Account until you or your Financial Adviser give us investment instructions.
- 2) We will require satisfactory transfer information from the transferring scheme administrator(s) before investments can take place.
- 3) Investments will only take place upon receipt of all expected money, unless we have received alternative written instructions.
- 4) We will not normally process your investments until your new income has been calculated, unless we have received alternative written instructions.

**Before signing this declaration, please carefully read and understand the Private Client SIPP Terms and Conditions; the Private Client SIPP Charges Schedule; and James Hay Online Terms and Conditions. These documents specify important terms, conditions and information about your Private Client SIPP, and form the agreement between James Hay Partnership and you in relation to your Private Client SIPP.**

**Before signing this declaration, please also carefully read and understand the Key Features of the Private Client SIPP, and SIPP Technical Product Guide.**

**If you do not understand any terms, conditions or information contained in the documents mentioned above, and/or you require advice on the same, please contact your Financial Adviser or other suitably qualified professional.**

**If you have any queries for James Hay Partnership, please direct them to James Hay Partnership, Dunn's House, St Paul's Road, Salisbury, Wiltshire, SP2 7BF; or telephone us on: 0845 850 4455.**

I hereby apply to James Hay Insurance Company Limited for membership of the Private Client SIPP, and declare as follows:

- a) I agree at all times to be bound by, and comply with, the Trust Deed and Rules of the James Hay Personal Pension Plan, as amended from time to time; Private Client SIPP Terms and Conditions; the Private Client SIPP Charges Schedule; and James Hay Online Terms and Conditions.
- b) To the best of my knowledge and belief, the particulars given on this Application Form are correct and complete.
- c) I undertake to tell you in writing within 30 days if:
  - there is any change to my name, permanent residential address or residency status;
  - I am made bankrupt; or
  - there are any changes to the information contained in this Application Form as soon as I am aware that what is stated is no longer true and complete.
- d) I accept that this application determines whether I am entitled to basic rate tax relief at source on my contributions.
- e) I agree that the total contributions to any registered pension schemes in respect of which I am entitled to tax relief will not exceed the higher of:
  - £3,600; or
  - my relevant UK earnings for that tax year.
- f) If I am no longer entitled to tax relief on my contributions I will undertake to tell you in writing no later than:
  - 5 April in the year of assessment in which this occurs; or
  - within 30 days of this change.
- g) I accept that if I appoint a Financial Adviser, you will send correspondence to my Financial Adviser unless I have requested otherwise or if I cease to use the services of a Financial Adviser.
- h) I accept that the value of my Private Client SIPP may only be applied to provide benefits at the time I take retirement benefits or upon my death and that James Hay Pension Trustees Limited will provide the appropriate benefits as required.
- i) If I have appointed a Financial Adviser, I give my authority for you to accept investment and disinvestment instructions from them and to pay adviser charges to them as detailed in this Application Form.
- j) If I have indicated that I wish to use the services of an Investment Manager under section 4 of this Application form, I accept and agree that:
  - I am solely responsible for all decisions relating to the purchase, retention and sale of the investments forming part of my Private Client SIPP; and
  - you have not carried out and shall not in future carry out any review of the Investment Manager's financial status or their investment and/or risk strategies. I am/my Financial Adviser is responsible for checking these matters and ensuring that the Investment Manager is suitable for my investment objectives.
- k) I accept that I will receive a statement of my Private Client SIPP once every 12 months.
- l) If I am investing in a UCITS fund, I certify that before providing investment instructions to you I will have either:
  - printed a copy of the current version of the Key Investor Information Document (KIID); or
  - saved an electronic copy of the current version of the KIID.
- m) I authorise and instruct you to transfer funds from the scheme(s) listed in this application directly to you. Where you have asked me to give you any original policy document(s) in return for the transfer of funds and I am unable to do so, I accept full responsibility for any losses and/or expenses which are the result, and which a reasonable person would consider to be the probable result, of any untrue, misleading or inaccurate information deliberately or carelessly given by me, or on my behalf, either in this Application Form or with respect to benefits from the scheme(s).
- n) I authorise any relevant third parties to release all necessary information to you to enable the transfer of funds to you.
- o) I authorise you to obtain from and release to the Financial Adviser named in this application any additional information that may be required to enable the transfer of funds.
- p) If an employer is paying contributions to any of the schemes listed in this application, I authorise you to release to that employer any relevant information in connection with the transfer of funds from the relevant scheme(s).
- q) Until this application is accepted and complete, your responsibility is limited to the return of the total payment(s) to the provider(s) of the scheme(s) listed in this application.
- r) Where the payment(s) made to you represent(s) all of the funds under the scheme(s) listed in this application, then payment made as requested will mean that I shall no longer be entitled to receive pension or other benefits from the scheme(s) listed.

- s) Where the payment(s) made to you represent(s) part of the funds under the scheme(s) listed in this application, then the providers of the scheme(s) listed in this application will be discharged of all claims and responsibilities only in respect of the part of the scheme(s) represented by the payment(s).
- t) I accept full responsibility in respect of any claims, losses and expenses that you and the current provider(s) may incur as a result of any incorrect information provided by me in this Application Form or of any failure on my part to comply with any aspect of this application.
- u) Where transferring funds from schemes that are already in income drawdown, if the funds are a mixture of capped drawdown and flexi-access drawdown, I elect to covert all the drawdown funds to flexi-access drawdown.

#### Data Protection Statement

Whether or not you become a customer, we will ensure that your information is only used in accordance with your instructions and our own strict internal confidentiality policies. If because of your instructions your personal data is held or disclosed in countries that do not have the same level of protection as in the United Kingdom we will take appropriate steps to protect it.

Your information may be used for administration purposes, and to:

- provide and run the Private Client SIPP you have applied for and develop and improve our products and services;
- identify and advise you by post, telephone or electronic media of products or services, which our Group of companies and associated companies think may interest you; and
- invite you to take part in market research surveys.

**MARKETING COMMUNICATIONS: If you do not want to receive (by post, telephone or electronic media) up to date information on other products or services or to be included in market research, please tick this box to opt-out**

Before we can open your Private Client SIPP, we may make searches at credit reference agencies who will supply us with information including information from the electoral register, for the purposes of verifying your identity. Scoring methods may be used to verify your identity.

The credit reference agencies will record details of the search whether or not your application proceeds. This is not a credit check and will not be seen or used by lenders to assess your ability to obtain credit.

If you give us false or inaccurate information and fraud is identified, details will be sent to fraud prevention agencies by IFG Group PLC. Law enforcement agencies may access and use this information.

We and other organisations may search and use these records to prevent fraud and money laundering, for example:

- to help make decisions about credit and credit related services, insurance proposals and claims, and all types of facilities;
- to manage accounts and facilities, (including tracing debtors) and recovering debt; and
- to help make decisions about job applicants and employees.

We and other organisations may search and use from other countries the information recorded at fraud prevention agencies. Further information on the credit reference agencies and fraud prevention agencies that we use is available by contacting us.

We may also give essential information about your Private Client SIPP to others if necessary to run your Private Client SIPP and for regulatory purposes, including other companies within the Group and its reinsurers, and any third parties with whom your Private Client SIPP holds investments. We may disclose your personal data to third parties where we consider it appropriate and lawful to do so, such as for fraud prevention, business analysis purposes or where you have given us permission to do so.

If you have a Financial Adviser appointed, your Financial Adviser may view any additional products you hold with us on James Hay Online, even though your Financial Adviser is not appointed for those additional products.

Information about you will be kept after your Private Client SIPP is closed. You have the right to see certain records we hold about you on payment of a fee. An information sheet explaining your rights is available from James Hay Partnership, Dunn's House, St Paul's Road, Salisbury, SP2 7BF.

**It is an offence to make false statements and the penalties are severe and could lead to prosecution.**

**By signing this Application Form below I agree to be bound by, and to at all times comply with, the Private Client SIPP Terms and Conditions; the Private Client SIPP Charges Schedule; James Hay Online Terms and Conditions; the above Declaration; and the above Data Protection Statement.**

Applicant's name

Applicant's signature

Date

James Hay Partnership is able to provide literature in alternative formats. The formats available are: Large Print (as recommended by RNIB), Braille, Audio Tape and PC Disk. If you would like to receive this document in an alternative format please contact us on 0845 850 4455. For the hard of hearing and / or speech impaired, please use the Typetalk service via 18001 0845 850 4455.

James Hay Partnership is the trading name of James Hay Insurance Company Limited (JHIC) (registered in Jersey number 77318); IPS Pensions Limited (IPS) (registered in England number 2601833); James Hay Administration Company Limited (JHAC) (registered in England number 4068398); James Hay Pension Trustees Limited (JHPT) (registered in England number 1435887); James Hay Wrap Managers Limited (JHWM) (registered in England number 4773695); James Hay Wrap Nominee Company Limited (JHWNC) (registered in England number 7259308); PAL Trustees Limited (PAL) (registered in England number 1666419); Santhouse Pensioner Trustee Company Limited (SPTCL) (registered in England number 1670940); Sarum Trustees Limited (SarumTL) (registered in England number 1003681); Sealgrove Trustees Limited (STL) (registered in England number 1444964); The IPS Partnership Plc (IPS Plc) (registered in England number 1458445); Union Pension Trustees Limited (UPT) (registered in England number 2634371) and Union Pensions Trustees (London) Limited (UPTL) (registered in England number 1739546). JHIC has its registered office at 3rd Floor, 37 Esplanade, St Helier, Jersey, JE2 3QA. IPS, JHAC, JHPT, JHWM, JHWNC, SPTCL, SarumTL and IPS Plc have their registered office at Trinity House, Buckingham Business Park, Anderson Road, Swavesey, Cambs CB24 4UQ. PAL, STL, UPT and UPTL have their registered office at Dunn's House, St Paul's Road, Salisbury, SP2 7BF. JHIC is regulated by the Jersey Financial Services Commission and JHAC, JHWM, IPS and IPS Plc are authorised and regulated by the Financial Conduct Authority. The provision of Small Self Administered Schemes (SSAS) and trustee and/or administration services for SSAS are not regulated by the FCA. Therefore, IPS and IPS Plc are not regulated by the FCA in relation to these schemes or services.(01/14)

[www.jameshay.co.uk](http://www.jameshay.co.uk)

# Confirmation of Verification of Identity Private Individual

Introduction by an FCA-Regulated Firm

## Explanatory notes

1. A separate confirmation must be completed for each customer (e.g. joint holders, trustee cases and joint life cases). Where a third party is involved, e.g. a payer of contributions who is different from the customer, the identity of that person must also be verified, and a confirmation provided.
2. This form cannot be used to verify the identity of any customer that falls into one of the following categories:
  - Those who are exempt from verification as being an existing client of the introducing firm prior to the introduction of the requirement for such verification, **or**
  - Those whose identity has not been verified by virtue of the application of a permitted exemption under the Money Laundering Regulations, **or**
  - Those whose identity has been verified using the source of funds as evidence.
3. This confirmation must carry an original signature, or an electronic equivalent.

Please complete this form in **BLOCK CAPITALS** and black ink and return it to: James Hay Partnership, Dunn's House, St Paul's Road, Salisbury SP2 7BF. If you require any assistance, please call your Account Executive or our general enquiry number 0845 850 4455.

## 1 Details of individual

Financial Adviser to complete

Full name of customer

Current address   
  
 Postcode

Date of birth

Previous address details if individual has changed address in the last 18 months   
  
 Postcode

## 2 Confirmation

Financial Adviser to complete

I/we confirm that

(a) The information in section 1 above was obtained by me/us in relation to the customer

(b) The evidence I/we have obtained to verify the identity of the customer: (tick only one)

- meets the standard evidence set out within the guidance for the UK Financial Sector issued by JMLSG,  
OR
- exceeds the standard evidence (written details of the further verification evidence taken are attached to this confirmation)

Name  Signature

Position  Date

## 3 Details of introduction firm (or sole trader)

Financial Adviser to complete

Full name of regulated firm (or sole trader)

FCA reference number

## Checklist of additional identity documentation required

Copies of supporting literature and forms are available at [www.jameshay.co.uk](http://www.jameshay.co.uk)

### EVIDENCE OF YOUR IDENTITY TO OPEN YOUR SIPP

Completion of the Confirmation of Verification of Identity by your Financial Adviser

#### OR

Black and white photocopies of two documents - one from list A and one from list B. (Items from the same source cannot be used twice).

#### List A

- Unexpired passport
- Unexpired UK old style driving licence (not provisional)
- Unexpired UK photocard driving licence
- Firearms certificate or shotgun licence
- EEA or Switzerland National identity card
- Northern Ireland voters card.

#### List B

- Unexpired UK old style driving licence (not provisional)
- Unexpired UK photocard driving licence
- Council tax bill
- Firearms certificate or shotgun licence
- Bank statement (not internet printed)
- Credit card statement (not internet printed)
- Utility bill (not mobile phone, satellite/cable TV or internet printed bills)
- HM Revenue & Customs coding/assessment/statement/tax credit
- Northern Ireland voters card.

### EVIDENCE OF A THIRD PARTY'S IDENTITY (EXCEPT EMPLOYER) IF CONTRIBUTING TO YOUR SIPP

If the third party is an individual, please request a separate Confirmation of Verification of Identity from James Hay Partnership to be completed by your Financial Adviser.

#### OR

Black and white photocopies of two documents - one from list A and one from list B. (Items from the same source cannot be used twice).

#### List A

- Unexpired passport
- Unexpired UK old style driving licence (not provisional)
- Unexpired UK photocard driving licence
- Firearms certificate or shotgun licence
- EEA or Switzerland National identity card
- Northern Ireland voters card.

#### List B

- Unexpired UK old style driving licence (not provisional)
- Unexpired UK photocard driving licence
- Council tax bill
- Firearms certificate or shotgun licence
- Bank statement (not internet printed)
- Credit card statement (not internet printed)
- Utility bill (not mobile phone, satellite/cable TV or internet printed bills)
- HM Revenue & Customs coding/assessment/statement/tax credit
- Northern Ireland voters card.

### IF YOUR EMPLOYER CONTRIBUTION IS FROM AN UNINCORPORATED BUSINESS PLEASE SUPPLY A PHOTOCOPY OF:

- Latest reports and accounts
- HM Revenue & Customs tax return or invoice.

